Film Production Incentive Agreement

INSTRUCTIONS: This form, and a Film Production Incentive Application, must be completed by all applicants planning to apply for the Michigan Film Production Incentive. These forms must be approved by the Michigan Film Office and the State Treasurer **before** the applicant will be eligible for these incentives.

PART 1: GENERAL INFORMATION						
1. Name of Production Company (Applicant)			2. Federal Tax Ide	ntification Number or MI Treasury No.		
Address (Street/P.O. Box)		City, State, ZIP Code				
Telephone Number	Fax Number		E-mail Address			
3. Doing Business As (If Applicable)			Telephone Number	er		
Address (Street/P.O. Box)		City, State, ZIP Code				
4. Applicant Type						
Individual	Partners	ship	Ot	ther:		
S-Corporation	LLC - ta	xed as a corporation				
C-Corporation	LLC - ta	xed as a partnership				
5. Name of Person Completing Agreement	Telephone Number		E-mail Address			
Address of Person Completing Agreement (Street, P.C	Box, City, State, ZIP Code)		Fax Number			
6. Check ONE of the following which describes this pro	oduction.					
Motion Picture	Interactive Television	Video		Pilot		
Documentary	Music Videos	Digita	al Animation	Video Teaser		
Television Series	Interactive Games	An In	teractive Website			
Television Miniseries	Video Games		er or Commercial ified Production	promoting a State Certified		
Television Special	Internet Programming					
Interstitial Television Programming	Internet Video			y to stimulate the sale, marketing, on of future investment in a		
Long-form Television	Sound Recording		ied production.	on or ruture investment in a		
Production Location(s)		Core Community		Non-Core Community		
7. Provide a brief description of the production that the	company intends to produce	e in whole or in part in Michigan	(include information	such as the title of the production, a		
7. Provide a brief description of the production that the company intends to produce in whole or in part in Michigan (include information such as the title of the production, a plot summary, storyboard, actors, etc.)						
8. List your expected expenses for this Michigan project. Include only your estimated costs for in-state "direct production expenditures" (i.e., rental/purchase of Michigan equipment, materials, products and services, above-the-line wages and salaries and Michigan below-the-line wages and salaries) and "qualified personnel expenditures" (i.e., non-Michigan below-the-line wages and salaries). Attach additional sheets if necessary.						
PROJECT ITEM	COST	PROJECT ITI	EM	COST		
Above-the-Line Labor Wages/Salaries	N	lichigan Food/Restaurant E	xpenses			
Michigan Below-the-Line Labor Wages/ Salaries	N	lichigan Equipment Rental/l	^D urchase			
Non-Michigan Below-the-Line Labor Wages/Salaries	N	lichigan Location Fees				
Michigan Lodging Expenses	N.	Michigan Materials Rental/Purchase (Set				
Michigan Building(s) Rental		Construction, Wardrobe, etc.)				
Michigan Contracted Services (Casting,				FILM OFFICE USE ONLY		
Security, etc. Itemize separately.)				Production Project Number		

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OTHER PROJECT ITEMS	COST	OTHER PROJECT ITEMS	COST		
Michigan		Michigan			
Michigan		Michigan			
Michigan		Michigan			
Michigan		Michigan			
		Total Estimated Michigan Project Expenditures			
		10. Total Estimated Project Budget			
		11. Anticipated Incentive			
12a. The production company shall provide the Michigan Film Office with the information and independent certification the Michigan Film Office and the Department of Treasury deem necessary to verify direct production expenditures, qualified personnel expenditures and eligibility for the credit. Agreement incorporates the application by reference. Check if the applicant so agrees to this requirement.					
12b. Any request to approve expenses over the budget set forth herein must be made in writing to the Michigan Film Office and must be made and approved PRIOR TO the incurrence of such addional expenses. Such requests must describe the reasons that the additional expenses are necessary, and must be signed by the qualified production company. All such requests will be considered by the Michigan Film Office and the State Treasurer, and may be approved if good cause exists to do so. Check if the applicant agrees to comply with this procedure.					
13a. Date of expected commencement of work in the State of Michigan on the identified production. Work must commence within 90 days of the date of this agreement, or the agreement shall expire unless a request is submitted by the production company to extend the period for commencement of work for good cause shown and that extension for up to an additional 90 days is so approved by the Michigan Film Office.			Date		
3b. Date of expected completion of work in the State of Michigan on the identified project.			Date		
14. To enter into agreement with the Michigan Film Office, the production company must here certify that it will not depict obscene matter or an obscene performance according to 1984 PA 343 MCL 752.361 to MCL 752.374. Check if the applicant so agrees to this requirement.					
CERTIFICATION					
15. By signing below, I/we understand that, along with this completed document and required documentation, I/we must provide screen credit thanking the Michigan Film Office and stating that the production was filmed in Michigan.					
I certify that I am a representative of the applicant with authority to enter into this agreement on behalf of the applicant and am authorized to make the statements of affirmation contained herein.					
I hereby agree to allow representatives of the Michigan Film Office and the Michigan Department of Treasury access to the property and applicable records as may be necessary for the administration of this program.					
I certify, under penalties of perjury, that the statements and information contained in this agreement and attachments are complete, true, and correct to the best of my knowledge and belief.					
I certify that the applicant listed in this agreement is not delinquent in a tax or other obligation owed to the State of Michigan nor is owned or under common control of an entity that is delinquent in a tax or other obligation owed to the State of Michigan.					
I certify that the applicant listed in this agreement is not an entity that is more than 30% owned, affiliated, or controlled by an entity or individual who is in default on a loan made by the State of Michigan, a loan guaranteed by the State of Michigan, or a loan made or guaranteed by any other state.					
I certify that the applicant will comply with the delinquency and default certifications for the length of the agreement and understand that this compliance will be a condition of receiving the postproduction certificate of completion.					
Preparer's Printed Name					
Preparer's Signature		Date			
Mail or overnight the agreement and all related documents to: Michigan Film Office, 300 North Washington Square, 4th Floor, Lansing, MI 48913					
FILM OFFICE AND DEPARTMENT OF TREASURY USE ONLY					
Maximum value that may be issued subject to verification of this project's actual Michigan production expenses and Michigan economic benefit.					
APPROVED		DENIED			
Michigan Film Office		Date			
APPROVED		DENIED			
State Treasurer Signature		Date			
			FILM OFFICE USE ONLY		

Production Project Number